

## 2025 Personal Tax Questionnaire

for the income tax year starting 1 April 2024 to 31 March 2025

Please ensure you sign and return this questionnaire with all relevant information. Please mark the ENCLOSED box to confirm information is enclosed. If question is not applicable please mark the N/A box.

**Note: Incomplete information will result in a delay in starting your accounts and may increase costs to you.**

Name: \_\_\_\_\_

### A RESIDENCY ENCLOSED N/A

1. **ARE YOU A NEW OR RETURNING NZ RESIDENT?**  
Please provide us with your departure/arrival details from/to NZ ☐ ☐
2. **HAVE YOU LEFT NZ PERMANENTLY OR FOR AN EXTENDED PERIOD?**  
Please provide us with your departure details from NZ ☐ ☐  
Have you completed any IRD Tax Residency Questionnaire? If so please provide copy ☐ ☐  
PLEASE CONTACT US IMMEDIATELY IF YOU ARE PLANNING TO LEAVE NZ FOR AN EXTENDED PERIOD ☐ ☐
3. **ARE YOU A SETTLOR/TRUSTEE/BENEFICIARY OF ANY OVERSEAS TRUSTS/ESTATES?**  
Please provide details of the Trust/Estate ☐ ☐
4. **HAVE YOU SOLD ANY PROPERTY (INCLUDING NON RENTAL) PURCHASED ON OR AFTER 29 MARCH 2018?**  
Please provide details of property sales  
(Including sale and purchase agreements, settlement statements and valuation) ☐ ☐  
\$ \_\_\_\_\_
5. **HAVE YOU PURCHASED ANY PROPERTY (INCLUDING FAMILY HOME) ON OR AFTER 27 MARCH 2021?**  
Please provide details of property purchases  
(Including sale and purchase agreements, settlement statements and valuation) ☐ ☐  
\$ \_\_\_\_\_

### B NEW ZEALAND INCOME ENCLOSED N/A

6. **EMPLOYMENT INCOME**  
Income with PAYE/Withholding Tax deducted ☐ ☐  
\$ \_\_\_\_\_  
Redundancy payment received  
(Please attach letter from employer) ☐ ☐  
\$ \_\_\_\_\_
7. **INTEREST RECEIVED**  
Please provide Resident Withholding Tax Certificate ☐ ☐  
\$ \_\_\_\_\_
8. **DIVIDENDS RECEIVED**  
Please provide dividend statements (including power company dividend) ☐ ☐  
\$ \_\_\_\_\_
9. **PORTFOLIO INVESTMENT ENTITY (PIE) INCOME**  
Please provide PIE statements ☐ ☐  
\$ \_\_\_\_\_
10. **TRUST/ESTATE INCOME**  
Please provide trust/estate name and details ☐ ☐  
\$ \_\_\_\_\_
11. **RENTAL INCOME**  
Please complete separate Property Investment Questionnaire ☐ ☐  
\$ \_\_\_\_\_

## 2025 Personal Tax Questionnaire

### 12. PARTNERSHIP/BUSINESS INCOME

Please complete separate Business Questionnaire

☐ ☐

\$

### 13. SHAREHOLDER SALARY/LTC LOSSES

Please advise name of companies & provide copy of financial statements

☐ ☐

\$

### 14. OTHER NZ INCOME

Please provide details

(E.g. share trading, Government stock, etc.)

☐ ☐

\$

### 15. ARE YOU ENTITLED TO PARTICIPATE IN ANY EMPLOYEE SHARE OPTIONS OR SIMILAR INCENTIVE SCHEMES?

Please provide details

☐ ☐

\$

## C OVERSEAS INCOME

ENCLOSED N/A

### 16. OVERSEAS SALARY/CONSULTANCY FEES

Please provide details

☐ ☐

\$

### 17. OVERSEAS RENTAL INCOME

Please complete separate Property Investment Questionnaire

☐ ☐

\$

### 18. OVERSEAS INTEREST RECEIVED

Please provide interest certificates

☐ ☐

\$

### 19. OVERSEAS DIVIDENDS RECEIVED

Please provide dividend statements

☐ ☐

\$

### 20. OVERSEAS PENSION PAYMENTS RECEIVED

Please provide details of payments

☐ ☐

\$

### 21. OVERSEAS SHARES/SUPERANNUATION/LIFE INSURANCE POLICIES

Please provide details including:

Cost of investments (including premiums and other contributions)

Purchase/contribution and sale/distribution details

Market values as at 01/04/2024 and 31/03/2025

Investment advisor reports and their contact details

☐ ☐

\$



**H HOW WOULD YOU LIKE TO SEND US YOUR DOCUMENTS**

- via Xero Portal

☐
- via Email

☐
- Hard Copy

☐

**I HOW WOULD YOU LIKE TO RECEIVE YOUR COMPLETED DOCUMENTS**

- Collect documents from PKF Withers Tsang office

☐
- Collect documents and meet with accountant/partner to review the results

☐
- Courier to home/office address

☐
- Post to home/office address

☐
- Email and post copies to home/office address

☐
- (Please note we are not responsible for any loss of documents sent via courier or post and a courier (signature required) must be used if package is too large for standard NZ postal delivery)

Name:		Signature:	
Email:		Phone:	
Postal Address:		Date:	

PLEASE REMEMBER TO COMPLETE THE TERMS OF ENGAGEMENT